

10/626103

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.:

FLING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
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4		/				
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49						
50						
TOTAL IND.	7					
TOTAL DEP.	21					
TOTAL CLAIMS	28					

	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						